

## FERENCE & ASSOCIATES

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### USPTO FACSIMILE COVER SHEET

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To: Commissioner for Patents  
Fax Number: (703) 872-9306  
Date: May 10, 2005  
Pages: 16 pages (including this cover sheet)

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#### MESSAGE:

Application No. 09/752,959  
Examiner Charles Kyle  
Art Unit 3624

Amendment Transmittal  
Change of Correspondence Address  
Amendment

DE9-1999-0077  
(590.161)

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FERENCE & ASSOCIATES  
Amendment Transmittal

Atty. Docket No. DE9-1999-0077  
(590.161)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Hansmann et al.  
Serial No. : 09/752,959 Examiner : Kyle, Charles  
Filed : April 26, 2001 Group Art Unit : 3624  
For : METHOD OF PAYMENT BY MEANS OF AN ELECTRONIC  
COMMUNICATION DEVICE

HON. COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

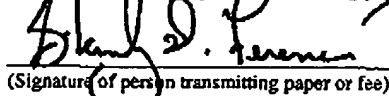
1. ☐ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☐ Small Entity status of this application has been established by a verified statement previously submitted.
4. ☐ A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF FACSIMILE TRANSMITTAL

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (703) 872-9306 on May 10, 2005 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III

(Type or print name of person transmitting paper or fee)

  
(Signature of person transmitting paper or fee)

FERENCE & ASSOCIATES  
Amendment Transmittal

Atty. Docket No. DE9-1999-0077  
(590.161)

5. ☒ Also enclosed: Change of Correspondence Address
6. ☒ No additional filing fee is required.
7. ☐ The filing fee has been calculated as shown below:

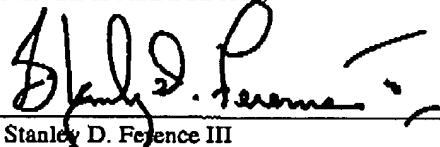
|  | Claims<br>Remaining<br>After<br>Amendment<br>(Col. 1) | Highest<br>No. Prev.<br>paid for<br>(Col. 2) | Present<br>Extra<br>(Col. 3) | SMALL ENTITY    |     | OTHER THAN A<br>SMALL ENTITY |                 |
|--|---|--|------------------------------|-----------------|-----|------------------------------|-----------------|
|  |   |  |                              | RATE            | FEE | RATE                         | FEE             |
| Total<br>Claims  | 17  | ** 20  | = + 0                        | x \$25          | =   | OR x \$508                   | =               |
| Ind.<br>Claims   | 3   | *** 3  | = + 0                        | x \$100         | =   | OR x \$200                   | =               |
| <input type="checkbox"/> Multiple Dependent Claim<br>Presented |   |  |                              | + \$180         | =   | OR + \$360                   | =               |
|  |   |  |                              | TOTAL = \$_____ |     | OR                           | TOTAL = \$_____ |

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.
- \*\*\* If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$\_\_\_\_\_ to cover the filing fee.
9. ☐ The Commissioner is hereby authorized to charge the \$\_\_\_\_\_ filing fee to Deposit Account No. 50-0510.
10. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

FERENCE & ASSOCIATES

By   
Stanley D. Ference III  
Reg. No. 33,879

Dated: May 10, 2005

Mailing Address:

Customer No. 47049  
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Page 2 of 2